



X-RAY VERIFICATION/CERTIFICATION WORKSHEET				ACTION							
(Use additional sheet for remarks. Identify item by number.)				REQUIRED		NOT REQUIRED		TAKEN			
LOCATION (Include Building and Room Number)				DATE AND TIME OF SERVICE				DATE NEXT SERVICE DUE			
I. EQUIPMENT IDENTIFICATION											
COMPONENTS		MANUFACTURER		MODEL (Include type, style, size, focal spots, etc.)				SERIAL NUMBER (Housing)			
1. CONTROL NO. 1 (Master Control)											
2. CONTROL NO. 2 (Room Control)											
3. RADIOGRAPHIC TUBE											
4. RADIOGRAPHIC TUBE (Auxiliary tube)											
5. FLUOROSCOPIC TUBE											
II. VISUAL INSPECTION OF EQUIPMENT											
ITEMS FOR VISUAL INSPECTION				ACTION			INITIAL AND DATE				
				NOT REQUIRED	TYPE REQUIRED				ACTION TAKEN		
6. CERTIFICATION LABELS ARE AFFIXED AND VISIBLE											
7. STEEL COUNTERWEIGHT CABLES											
8. SHOCK-PROOF HIGH TENSION CABLES											
9. TUBE HANGER ASSEMBLY AND YOKES											
10. INDICATOR LIGHTS											
11. X-RAY TUBES FOR OIL LEAKS											
III. OPERATIONAL TESTING OF EQUIPMENT											
ITEMS FOR VISUAL INSPECTION				ACTION			INITIAL AND DATE				
				NOT REQUIRED	TYPE REQUIRED				ACTION TAKEN		
12. INTERLOCKS											
13. LOCKS											
14. BACKUP SAFETY TIMERS											
15. TABLE AND TUBESTAND MOTION											
16. BEAM LIMITING DEVICES (Manual and automatic mode)											
17. TABLE ANGULATION LIMIT SWITCHES											
18. DOES TUBE OVERLOAD PROTECTION CIRCUIT DISABLE EXPOSURE CIRCUIT?				<input type="checkbox"/> YES		<input type="checkbox"/> NO					
19. IS THE PRODUCTION OF X-RAYS INHIBITED UNTIL ANODE IS UP TO SPEED?				<input type="checkbox"/> YES		<input type="checkbox"/> NO					
20. DOES BRAKE ON HIGH SPEED STATOR OPERATE CORRECTLY? (Record coast down time for anode after exposure _____),				<input type="checkbox"/> YES		<input type="checkbox"/> NO					
IV. RADIOGRAPHIC CERTIFICATION											
21. SINGLE PHASE LINE VOLTAGE AND LINE DROP					22. THREE PHASE LINE VOLTAGE AND LINE DROP						
NO LOAD LINE VOLTAGE			VOLTS		NO LOAD LINE VOLTAGE			VOLTS			
A. L 1 TO GROUND					A. PHASE A TO B						
B. L 2 TO GROUND					B. PHASE B TO C						
C. L 3 TO L 2					C. PHASE A TO C						
LINE DROP TEST			VOLTS		LINE DROP TEST			VOLTS			
D. L 1 TO L 2											
23. TRANSFORMER BALANCE 1					D. PHASE A TO B						
A. ANODE VOLTAGE TO GROUND AT 100 KVP					E. PHASE B TO C						
B. CATHODE VOLTAGE TO GROUND AT 100 KVP					F. PHASE A TO C						
24. EXPOSURE TIMER TEST											
TIME SETTING ON CONTROL											
ACTUAL TIME MEASURED											
1 Only required annually.											

25. KILOVOLTAGE AND MILLIAMPERAGE VERIFICATION									
CONTROL SETTINGS	KILOVOLTAGE								
	20	40	60	80	100	120	140	150	
MA									
MA									
MA									
MA									
MA									
MA									
MA									
MA									
26. PENETROMETER FILM DENSITY			SATISFACTORY			UNSATISFACTORY			
27. RADIOGRAPHIC PHOTOTIMER TEST (Record MAS)									
	BUCKY			CHEST			OTHER		
A. NORMAL									
B. LIGHT									
C. DARK									
V. FLUOROSCOPIC CERTIFICATION									
28. KILOVOLTAGE VERIFICATION					29. AUTOMATIC BRIGHTNESS CONTROL				
MA SETTING	KILOVOLTAGE PEAK		<input type="checkbox"/> SATISFACTORY						
	FLUORO	ACTUAL	<input type="checkbox"/> UNSATISFACTORY						
1.0	40		30. SPOT FILM KILOVOLTAGE VERIFICATION						
1.0	60		KILOVOLTAGE PEAK						
			SPOT FILM SETTING						ACTUAL
1.0	80		60 @ _____ MA						
1.0	100		80 @ _____ MA						
1.0	120		100 @ _____ MA						
1.0	MAXIMUM		120 @ _____ MA						
31. SPOT FILM MILLIAMPERAGE AND SPACE CHARGE VERIFICATION									
FIXED MA STATION			ACTUAL MILLIAMPERAGE AT						
			LOW KVP	NEUTRAL KVP				HIGH KVP	
32. FLUOROSCOPIC MILLIAMPERAGE VERIFICATION									
MA STATION	NEUTRAL KVP SETTING	ACTUAL MA	33. FLUORO TIMER TEST (Timer set at 5 minutes)						
			A. WARNING DEVICE ALARMED AT _____ MINUTES						
			B. TIMER TERMINATED AT _____ MIN _____ SEC						
			C. DID TIMER TERMINATE EXPOSURE? <input type="checkbox"/> YES <input type="checkbox"/> NO						
			D. IS TIMER TIMING CORRECTLY WHEN CHECKED AGAINST CALIBRATED STOP WATCH? <input type="checkbox"/> YES <input type="checkbox"/> NO						
34. SPOT FILM TIMER TEST		SATFY	UNSATFY	35. PHOTOTIMER TEST					RECORD MAS
A. SHORT TIME				A. NORMAL SETTING					
B. MEDIUM TIME				B. LIGHT SETTING (-)					
C. LONG TIME				C. DARK SETTING (+)					
INSPECTED BY (Type or print name and grade)				SIGNATURE					